PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2003								D ·	 	ole	207 -	85	7	
	CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL TYPE	EN	<u>- </u>		····OTHE	RTHAN	
	TOTAL CLAIMS			34				RATE		FEE	OR	RATE	LENTITY	
	FOR			NUMBER FILED		NUMBER EXTRA				385.00	OR		1	
E	OTAL CHARG	EABLE CLAIMS	34	34 minus 20=		14		X\$ 9:	1		7	140.0	252	
i,	IDEPENDENT	CLAIMS		ninus 3 =		3	X43:		╬		OR	 	 	
M	MULTIPLE DEPENDENT CLAIM PRE						- ^~3=				OR	X86=	258	
	* If the difference in column 1 is less than zero, enter *0* in column 2										OR	+290=		
								TOTAL			OR	TOTAL	1280	
_	CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)						_	SMALL ENTITY OR				OTHER THAN SMALL ENTITY		
AMENDMENTA		REMAINING AFTER AMENDMENT	·	HIGHE NUMB PREVIOU PAID F	ER USLY	PRESENT EXTRA		RATE	T	ADDI- ONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	1.10	Minus	3	1_	-	l	X\$ 9=		•	OR	X\$18=		
	Independent	ENTATION OF M	Minus	*** (e		=	Ī	X43=	1		OR	X86=		
<u> </u>	THOTFIES	ENTATION OF M	OLTIPLE DE	PENDENT	CLAIM		ľ	+145=	T		OR	+290=		
•									╀		1	TOTAL		
		(Column 1)		(Colum	n 2)	(Column 3)	A	DDIT. FEE	<u> </u>]On /	DDIT. FEE		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMBE PREVIOL PAID FO	R ISLY	PRESENT EXTRA		RATE	TI	DDI- DNAL]. [RATE	ADDI- TIONAL FEE	
	Total	*	Minus	4-4		=	ſ	X\$ 9=	Γ		OR	X\$18=	755	
	Independent	*	Minus	***		=	r	X43=	┢		▎▐	X86=		
	PIRST PRESE	NTATION OF MU	JLTIPLE DEI	PENDENT C	LAIM		卜	445	╁		OR		· ·	
							Ł	+145=	<u> </u>		OR	+290=		
	. :	(Caluma 4)					AE	DOIT. FEE			OR A	TOTAL DDIT. FEE		
AMENDIMEN C		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column HIGHES NUMBE PRÉVIOUS	T R SLY	(Column 3) PRESENT EXTRA	Γ	RATE		DDI- DNAL	Γ	RATE	ADDI- TIONAL	
	Total		Minus	PAID FO		=	\vdash		F	EE_	-		FEE	
֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓	ndependent		Minus	***		-		X\$ 9=			OR	X\$18=		
<u> </u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							X43=			OR	X86≃		
• If :	If the entry in column 1 in loca then the									d	OR	+290=		
** (If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."								·		OR AD	TOTAL DIT. FEE		
Th	e "Highest Numb	per Previously Paid	For" (Total or	Independent)	is the h	ა, enter "3." lighest number fo			ropri	ale box i				